

PART B - FEE(S) TRANSMITTAL

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Sughrue Mion
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/031,404	05/15/2002	Masamichi Okada	Q68135	2114

TITLE OF INVENTION: REMEDIES FOR NEUROGENIC PAIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	10/20/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
JIANG, SHAOJIA A	1617	514-310000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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1. **SUGHRUE MION,**
 2. **PLLC**
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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

YAMANOUCHI PHARMACEUTICAL CO., LTD. TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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the application identified above.

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee

Susan J. Mack 10/2/03
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Susan J. Mack

Reg. 30,951

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10/08/2003 DEMHNU2 00000202 10031404

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